

194862
194863

STATE OF SOUTH CAROLINA

(Caption of Case)

Example: Application for a Class C Charter Certificate from
John Doe dba Doe's Limo

REQUEST TO CANCEL CLASS C TAXI
CERTIFICATE OF

SOUTHERN RIVER TAXI, INC. DBA LITTLE
RIVER TAXI

Posted: led

Dept: S.A.

Date: 9/9/08

SEP 08 2008

PSC SC
DOCKETING DEPT.

(Please type or print) 9:50

Submitted by: Robert Pikart

Address: 3243 Waccamaw Blvd

Myrtle Beach SC
29579

Telephone: 843-448-4242

Fax: _____

Other: _____

Email: _____

BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA

TRANSPORTATION COVER SHEET

RECEIVED

DOCKET

NUMBER: 1999 - 128 - T

AUG 27 2008

ORS
TTWWWW

If this is your first time filing an application with the PSC, you will not
have a Docket Number. The Commission will assign one to you. If you
have filed with the Commission before, a Docket Number was assigned
and should be entered above.

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Application - Class C Taxi | <input type="checkbox"/> Request to Amend Scope of Authority |
| <input type="checkbox"/> Application - Class C Charter | <input type="checkbox"/> Request to Amend Tariff (rate increase, etc.) |
| <input type="checkbox"/> Application - Class C Charter Bus | <input type="checkbox"/> Request to Amend Passenger Limit |
| <input type="checkbox"/> Application - Class C Non-Emergency | <input type="checkbox"/> Request |
| <input type="checkbox"/> Application - Class E Household Goods | <input type="checkbox"/> Exhibit |
| <input type="checkbox"/> Application - Class E Hazardous Waste | <input type="checkbox"/> Late-Filed Exhibit |
| <input type="checkbox"/> Application | <input type="checkbox"/> Letter |
| <input type="checkbox"/> Request for Extension to Comply with Order | <input type="checkbox"/> Proposed Order |
| <input type="checkbox"/> Request for Order Granting Authority to Obtain Certificate of Public Convenience and Necessity to Be Rescinded | <input type="checkbox"/> Publisher's Affidavit |
| <input checked="" type="checkbox"/> Request for Cancellation of Certificate | <input type="checkbox"/> Reservation Letter |
| <input type="checkbox"/> Request for Suspension | <input type="checkbox"/> Response |
| <input type="checkbox"/> Request for Reinstatement | <input type="checkbox"/> Return to Petition |
| <input type="checkbox"/> Request for Name Change on Certificate | <input type="checkbox"/> Other: _____ |

Request for Cancellation of Certificate

File the original with: Public Service Commission of South Carolina Docketing Department Motor Carrier Matters P.O. Box 11649 Columbia, S.C. 29211 (803) 896 - 5100 FAX (803) 896-5199	Mail or fax a copy to: S.C. Office of Regulatory Staff Transportation Department P.O. Box 11263 Columbia, S.C. 29211 (803) 737-0578 FAX (803) 737-0815
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DATE: 8-19-08

Please consider this a request to cancel my Class:

- ☒ C (Taxi) Certificate ☐ Class A Restricted Certificate
- ☐ C Charter Certificate
- ☐ C Charter Bus Certificate
- ☐ C Non-Emergency Certificate
- ☐ E Household Goods Certificate
- ☐ E Hazardous Wastes Certificate

RECEIVED

SEP - 5 2008

ORS
T,T,W,W/W

My Certificate of Public Convenience and Necessity Number is 6749

Southern Range Taxi DBA Southern Range Taxi
(Name of Company) Inc (If applicable)

3243 Waccamaw Blvd
(Street Address)

(Mailing Address if different from Street Address)

MTB, SC 29579
(City, State, Zip Code)

(City, State, Zip Code)

(843) 448-4242
(Telephone Number)

[Signature]
(Signature)

[Signature]
(Title)